



Missouri Pharmacy Program – Preferred Drug List



Electrolyte Depleters

Effective 12/14/2006

Revised 01/03/2008

Preferred Agents

Available Without Clinical Edits

- Phoslo®
- Fosrenol®
- Renagel®

Non-Preferred Agents

Available with Clinical Edits

<u>Approval Criteria</u>	<u>Denial Criteria</u>
N/A	N/A
	Drug Prior Authorization Hotline: (800) 392-8030.